## ISSUE SLIP STAPLE AREA (for additional cross references)

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POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	00	· · · · · · · · · · · · · · · · · · ·	1	
O.I.P.E. CLASSIFIER	1/1/	An19CI	1/10	
FORMALITY REVIEW	1010	1002-	14/10	

SEC

## INDEX OF CLAIMS

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	Allowed		Non-elected
_	(Through numeral) Canceled		Interference
÷	Restricted	0	Appeal
		U	Ohiostad

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If more than 150 claims or 10 actions staple additional sheet here

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